

STATE: MINNESOTA

Supplement 5 to ATTACHMENT 3.1-B

Effective: January 1, 1998

TN: 98-12

Approved: MAY 13 1998

Supersedes: --

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AMOUNT, DURATION AND SCOPE OF MEDICAL AND REMEDIAL  
CARE SERVICES PROVIDED TO THE MEDICALLY NEEDY

PACE SERVICES

  x   The State of Minnesota has not entered into any valid  
program agreements with a PACE provider and the Secretary of  
Health and Human Services.

       The State of Minnesota has entered into a valid program  
agreement(s) with a PACE provider(s) and the Secretary, as  
follows:

Name of PACE provider: \_\_\_\_\_

Service area: \_\_\_\_\_

Maximum number of individuals to be enrolled: \_\_\_\_\_



**STATE OF MINNESOTA  
DEPARTMENT OF HUMAN SERVICES  
444 LAFAYETTE ROAD  
ST. PAUL, MINNESOTA 55101**

January 2, 1986

Ms Patti Richter  
Department of Health and Human Services  
Health Care Financing Administration  
175 West Jackson Boulevard, Suite A-835  
Chicago, Illinois 60604

Dear Ms. Richter:

As agreed, during the December 30, 1986 telephone conversation between yourself and Patricia MacTaggart of my staff, Minnesota will submit the organ transplant criteria as a state plan amendment during the first quarter of 1987.

This is consistent with COBRA's requirement for implementation effective January 1, 1987.

Thank you for the assistance and cooperation you provided to my staff regarding the organ transplant criteria state plan amendment.

Sincerely,

*Robert Baird*  
Robert Baird  
Director  
Health Care Programs

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DHS - 2489  
(4-86)